

Frequently Asked Questions

POLIO (Poliomyelitis)

What is POLIO (Poliomyelitis)?

Poliovirus infection occurs when the poliovirus enters through the mouth and ultimately affects the nerves, which control muscle movements. This can lead to paralysis.

How is Polio spread?

Polio is spread two ways: by the fecal-oral route and by the oral-oral (respiratory) route. The virus persists in the throat for about one week after onset of illness. The virus is excreted in the feces for several weeks and in rare cases, for months. Patients are infectious as long as the virus is excreted in the feces.

Who can get Polio?

Since infants and children who are immunized with Oral Polio Vaccine (OPV) can excrete vaccine virus in feces for several weeks, any unimmunized child or adult in close contact with a child who is shedding the virus is at risk of infection with poliovirus.

What are the symptoms?

A low-grade fever and sore throat occurs in 4% to 8% of people infected with polymyelitis. Headache and stiff neck occurs in 1% to 5% of patients after minor illness resolves. Paralysis occurs in approximately 1 out of 250 infections.

How soon do symptoms appear?

Polio symptoms usually start within three to six days. For the onset of paralysis, symptoms usually begin within seven to 21 days, but occasionally as short as four days.

How is it treated?

There is no specific treatment for Polio.

Is there a vaccine to prevent Polio?

Polio is vaccine-preventable. Vaccine remains the best preventive measure against Polio. There are two types of Polio vaccine. One is administered into the muscle by injection (IPV) and the other is administered by mouth (OPV).

24/7 Emergency Contact Number: 1-888-295-5156

Revised 05/2006

Document #: 35-05-20/07/05/04L